PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 PAGE 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1												5 45 1
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			23				R	ATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			→3 minus 20=		• 3		×	X\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			3 minus 3 =		· \$		X	40=		OR	X80=	,
MULTIPLE DEPENDENT CLAIM PRESENT							+1	35=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TC	TOTAL		OR	TOTAL	764	
	SUL (Column 1) (Column 2) (Column 3)								ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	cane	Minus	44		=	x	§ 9=		OR	X\$18=	
	Independent • 500		Minus ***			=	×	40=		OR	X89=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+1	35=		OR	/ 270=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	AUU	T. FEE		j	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X	9=		OR	X\$18=	
	Independent	NTATION OF MI	Minus	***	CI AINA	=	X	40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								35=		OR	+270=	
								TOTAL T. FEE		OR	TOTAL ADDIT. FEE	
ADDIT. FEE (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	ATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X	9=		OR	X\$18=	
	Independent	·	Minus	···		-	X	0=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1.4	35=				
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL ADDIT. FEE **TOTAL ADDIT. FEE												
	ne rignest Num	ider Previously Paid	o For (Total or	independe	ent) is the	nighest number	tound in	the app	propriate box	in col	umn 1.	

Application or Docket Number